Exhibit "A"

Case 1904ARGE3OF-INSCRIMINAT	WiN ent 164-4 Filed (03/06/2007 ^y	Page 24016 PUMBER	
This form is affected by the Privacy Act of 1974; See Privacy completing this form.	y Act Statement before	☑ FEPA☑ EEOC	12106 37B-A3-00285	
Hawaii Civil Rights			and EEOC	
State or local Ager NAL Indicate Mr., Ms., Mrs.)	icy, if any	L HOME TELEPIN		
,		HOME TELEPHONE (Include Area Code)		
Mr. Robert W. Sherez STREET ADDRESS	CITY, STATE AND ZIP CODE	(808) 596-9145		
715 Pensacola Street, No. 2	Honolulu, HI 96814	DATE.		
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGEN DISCRIMINATED AGAINST ME (If more than one list below.)		, STATE OR LOCA	L GOVERNMENT AGENCY WHO	
NAME	NUMBER OF EMPLOY	NUMBER OF EMPLOYEES, MEMBERS TELEPHONE (Include An		
State of Hawaii, Department of Education	15+	15+ (808) 233-57		
STREET ADDRESS	CITY, STATE AND ZIP CODE	COUNTY, STATE AND ZIP CODE		
46-169 Kamehameha Highway	Kaneohe HI 96744	T TEL Chiroles	003	
	•	IELEPHONE (In	nclude Area Code)	
STREET ADDRESS	CITY, STATE AND ZIP CODE	<u> </u>	COUNTY	
			COUNT	
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))		DATE DISC	RIMINATION TOOK PLACE	
RACE COLOR SEX RELIGION	☐ NATIONAL ORIGIN	EARLIEST	2/28/03	
RETALIATION AGE DISABILITY O	THER (Specify)	CON	TINUING ACTION	
THE PARTICULARS ARE (Il additional space is needed attach extra sheet(s):				
terminated from my teaching position employed since 1988 and was working earning \$14.39 hourly. II. In Spring 2002, Virginia Soares, Windsthe case of a pregnant student because Sarah Gronah, Vice Principal at Castle pregnant students. Ira Ilson, Counseld able to assign me a pregnant student to may tutor a female student. When I asked for more assignments, Nalready and that's it. Regarding not be Mr. Soares told me that Ms. Gronah to student's teacher—I'm only their tutor.	ward District Secretary I am a male and this s High School, told me to or at Castle High School to tutor because Ms. Gr Ms. Gronah told me tha eing allowed to attend	told me that tudent is a feathat males can be the control on the control of the control on the c	at I was taken off emale. annot tutor tat he wouldn't be me that no male assignment is for my students, I am not the	
was increased and the tutoring hours	decreased.	as to writy		
I want this charge filed with both the FEOC and the State or local Agency of	NOTAGY		Page 1 of 3	
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.	I swear or affirm that I have reaknowledge, information and be	NOTARY - (When necessary for State & loca I swear or affirm that I have read the above charknowledge, information and belief 1 DISC 57		
te Charging Party (signature) OC FORM 5 DATE FILE Charging Party (signature)	SUBSCRIBED AND SWORN T	Sheily		
DATE FIL	LED: AUG 5 2003		MEW:ktk	

Case CHARGE30F-INSORIVINATION	hent 164-4	Filed 03/06	/2007	Page [©] 8	ARGE NUMBER	
This form is affected by the Privacy Act of 1974; See Privacy Act completing this form.		l	FEPA EEOC	121 37B	06 -A3-00285	
Hawaii Civil Rights Co	mmission		8	and EEC	OC .	
State or local Agency, if	any	LHON	TEL FOLIA			
· · · · · · · · · · · · · · · · · · ·		j		NE (Include A	Irea Code)	
Mr. Robert W. Sherez STREET ADDRESS CITY	STATE AND ZIP COD	(808) \(\begin{array}{c} \equiv \(\begin{array}{c} \equiv \equiv \\ \equiv \equiv \equiv \\ \equiv \equiv \equiv \equiv \\ \equiv \equiv \equiv \equiv \\ \equiv \equiv \equiv \equiv \equiv \\ \equiv	3) 596-9°	145		
745 Damas de Otre de N. O	iolulu, HI 96814				DATE OF BIRTH	
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY A	PPRENTICESHIP CON	MITTEE STATE	ORLOCAL	COMEDIME	NT ACTION	
DISCRIMINATED AGAINST ME (If more than one list below.) NAME						
State of Hawaii, Department of Education				(Include Area Code)		
TREET . 0.0.0.7.0.	15+ (808) 233-5700					
40. 400 I/	Vanacha III 06744			COUNTY		
NAME	Edite 111 30744	TELE	PHONE (Inc	tude Area Co	003 (e)	
					•	
STREET ADDRESS CITY,	STATE AND ZIP COD	E '			COUNTY	
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es)) RACE COLOR SEX DELICION [E	ATE DISCR ARLIEST	IMINATION T	OOK PLACE LATEST	
	ANATIONAL ORIG	1 -	_		2/28/03	
THE PARTICULARS ARE (If additional space is needed attach extra sheet(s):	(Specify)		CONT	INUING ACTI	ON	
 Ms. Sampei, Principal of the McKinley Accending early because attendance was falli III. I believe that I was subjected to unequal to terminated because of my sex, male, and it discrimination. This is in violation of Have based on the following: A. During the course of my employment terms and conditions of employment my tutoring assignment was taken not allowed to attend the IEP meet per course and I was not informed B. After I was taken off the case of my illegal. She told me that I would be the sex discrimination, I did not reconstruction. 	erms and cond in retaliation for waii Revised S ent, I was sub- ent, including from me; not ings of my stu- of this.	ditions of ear my opportatutes, Chipected to the but not lime assigned and ent; tutor of the formula in the content of the con	mploynosing the apter 3% e followited to: ny morning houseled Ms. lowever	nent and se sex 78. My b ving une in Sprir e tutorin ers were Soares to	peliefs are qual ag 2002, g cases; decreased	
V Lucian Company				Page :	2 of 3	
I want this charge filed with both the EEOC and the State or local Agency, if inty. I will advise the agencies if I change my address or telephone number and	NOTARY - (When i	necessary for Stat	e & loc	4		
cooperate fully with them in the processing of my charge in accordance with their procedures.	I swear or affirm that I have read the above ch. 1 DISC 572 knowledge, information and belief					
d under penalty of perjury that the following is true and correct	SIGNATURE OF C	West		ely	8/5/03	
Charging Facty (Signature)	SUBSCRIBED AND SY (Day, month, and ye	WORN TO BEFOR	RE ME THIS	DATÉ	, 	
EOC FORMS DATE FILED:	AUG 5 200			ME	W:ktk	

Case 1:04-cv-00390-JMS-KSCMINATION	ent 164-4 Filed 03	(06/2007 ^{CY}	Page 4 HARGE NUMBER				
This form is affected by the Privacy Act of 1974; See Privacy Act Statement before			FEPA 12106				
completing this form. Hawaii Civil Rights Co	ommission	⊠ EEOC	37B-A3-00285				
Hawaii Civil Rights Commission and EEOC State or local Agency, if any							
N. (Indicate Mr., Ms., Mrs.)		HOME TELEPH	ONE (Include Area Code)				
Mr. Robert W. Sherez (808)			08) 596-9145				
745 Demonstrate Ot 1 A A	Y, STATE AND ZIP CODE		DATE OF BIRTH				
715 Pensacola Street, No. 2	nolulu, HI 96814						
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)							
NAME	NUMBER OF EMPLOYE	TELEPHONE (Include Area Code)					
State of Hawaii, Department of Education STREET ADDRESS	Y, STATE AND ZIP CODE	(808) 233-5700					
40.400 Kanada - 1.48.4	neohe HI 96744		COUNTY				
NAME	11eone 111 90744	003 Iclude Area Code)					
STREET ADDRESS			·				
STREET ADDRESS	Y, STATE AND ZIP CODE		COUNTY				
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))		DATE DICCI					
RACE COLOR SEX RELIGION	Птюми отнош.	EARLIEST	RIMINATION TOOK PLACE				
	MATIONAL ORIGIN R (Specify)	□ con	2/28/03 TINUING ACTION				
THE PARTICULARS ARE (If additional space is needed attach extra sheet(s):		1 - 001	THOMAS ACTION				
 C. I also spoke to Sarah Gronah, Vice Principal of Castle High School, as Windward District Office. I told e against me because of my gender. D. Not long after my complaining to discriminated against because of my position at the McKinley Adult Composition at the McKinley Adult Composition at the my class was not fair. F. My job performance was more than 	nd Marty Matison, E each of them that it we the Castle Administ my gender, I was terro ommunity School.	ducational Stas illegal to	Specialist at the discriminate				
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures. The reference of the period of period of the following is true and correct.	NOTARY - (When necessary I swear or affirm that I have read knowledge, information and belie SIGNATURE OF COMPLAIN	the above cha	Page 3 of 3 1 DISC 573 Lerg 8/5/03				
Cate Charging Party (signature)	SUBSCRIBED AND SWORN TO (Day, month, and year)	BEFORE ME THIS					
EEOC FORM 5 DATE FILED:	AUG 5 2003		MEW:ktk				